U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

E CAME OF STREET			
1. File Number U - 2411	2. Fiscal Year Covered From: 1		
Name and address of person filing.	Name, file number, and address of labor organization.		
Name John A Kubica	Name Roofers And Waterproofers Local No. 65		
	Labor Organization File Number 014577		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 1537 Prairie Dr.	Street 16601 W. Dakota St.		
City Racine	City New Berlin		
State Wisconsin ZIP Code + 4 53406	State Wisconsin ZIP Code + 4 53151		
(except as specified in the A. Held an interest in, engaged in transactions (including loans) wi	our spouse or minor child directly or indirectly had any of the following interests be exclusions set forth in the instructions): ith, or derived income or other economic benefit of unization represents or is actively seeking to represent.		
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise disaling with the baseness and the part of which consists of buying from, selling or the leasing to, or otherwise disaling with the baseness of business (2) and part of which consists of buying from or selling or desing or declared the part of the	Name of Person Filing John	Kubica	NJ M909 F	File Number U- 2411	
Name Manning & Napier Advisora, Inc. Trade Name, if any: P.O. Box, Bidg, Room No., if any Suite 207 Street 6099 Riverside Dr. Cay Dublin State Ohio ZIP Code + 4 43017 10. If 9 b. or 9 c. is checked give fust or employer's name. Name The Bldg, Trds, United Pension Trust Pund Trade Name, if any: P.O. Box, Bidg, Room No., if any P.O. Box 530 Street 500 Rlm Grove Rd. City Elm Grove State Wisconsin ZIP Code + 4 53122 11.a. Nature of such dealing. Presentations of Investment Strategies (Retinance - documentation not retained or recorded) Lunch \$30.00 Lunch \$30.	substantial part of which consists of an employer whose employees (2) any part of which consists of the cons	of buying from, selling or leasing to, or of s your labor organization represents or is buying from or selling or leasing directly o	therwise dealing with the business actively seeking to represent, or r indirectly to, or otherwise	This report is mandatory under P.L. 95-257, us proposed	
a. Labor Organization A	8. Name and address of Business	(including trade name, if any).	9. Business deals with:		
Trade Name, if any: P.O. Box, Bidg., Room No., if any State Substance Sub	Name Manning & Napier Advisors, Inc.		a. Labor Organization		
Street 6099 Riverside Dr. City Dublin State Ohio ZIP Code + 4 43017 10. If 9.b. or 9.c. is checked give trust or employer's name. Name The Bldg. Trds. United Pension Trust Fund Trade Name, if any: P.O. Box Bldg., Room No., if any P.O. Box 530 Street 500 Elm Grove Rd. City Elm Grove State Wisconsin ZIP Code + 4 53122 11.b. Approximate dollar value of such dealing. Presentations of Investment Strategies (Estimate - documentation not retained or recorded) Lunch \$30.00 Baseball Game Ticket \$50.00 Baseball Game Ticket \$50.00 Baseball Game Ticket \$50.00 12.b. Approximate dollar value of such dealing. \$12.a. Nature of interest held or income received. 12.b. Amount. 12.b. Amount. 12.b. Amount. 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any. P.O. Box, Bldg., Room No., if any Street City State		v Suite 207			
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14.b. Amount of payment.

13.b. Is the Business an Employer

or Consultant